PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

07844-445001

CLAIMO AO EU EE									UT	<u>ر</u>	1 - 4 9	300
				FILED - PART I (Column 1) (Column 2)				SMALL TYPE	ENTITY			R THAN
TOTAL CLAIMS			14				RATE	FE	- OI	R SMAL RATE	L ENTITY	
FOR			NUMBI	NUMBER FILED		NUMBER EXTRA		BASIC F			BASIC FE	
TOTAL CHARGEABLE CLAIMS			181	1 % minus 20=		· Ø		X\$ 9=				
 	INDEPENDENT CLAIMS			5 minus 3 =		· 2		X40=			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
ML	ILTIPLE DEPE	ENDENT CLAIM	PRESENT	RESENT					-	OF	X80=	160.
* If the difference in column 1 is less than zero, enter "0" in column 2							, [+135=		OF	+270=	
CLAIMS AS AMENDED - PART II							TOTAL	·	OF	R TOTAL	870'u	
		(Column 1)		(Column 2) (Column)	SMALI	_ ENTIT	Y OR		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADD TION/ FEE	AL	RATE	ADDI- TIONAL
ENDI	Total	*	Minus	**		=	1	X\$ 9=	1	OR	X\$18=	FEE
AM	Independent FIRST PRES	* ENTATION OF M	Minus	***	01.411	=		X40=		OR	V00	
·	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		7	 	
BEST AVAILABLE COPY							L	TOTAL	 	OR	+270= TOTAL	
		(Column 1)		(Colum		(Column 3)	Α[ODIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	6	HIGHE NUMBI PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL
S	Total	<u> </u> *	Minus	**		=		X\$ 9=		OR	X\$18=	FEE
A	ndependent	* NTATION OF MU	Minus	***		=		X40=	ļ — —	1	X80=	
<u></u>		MATION OF MIC	DETIPLE DE	PENDENT	LAIM		 	135=		OR OR	+270=	
								TOTAL		┪ _╱ ╻╏	TOTAL	
_		(Column 1)		(Column		(Column 3)	ADI	DIT. FEE			ADDIT. FEE	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE] [RATE	ADDI- TIONAL
Į T	otal	*	Minus	**		=	T _x	(\$ 9=	FEE	1	X\$18=	FEE
	dependent	*	Minus	***		=	-	(40=		OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								·	OR	X80=	
f th	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	+270=	
**If th	e "Highest Nun	nber Previously Painber Previously Pai Der Previously Paid	d For IN THI	SPACE is les	ss than	20, enter "20."	ADD	TOTAL IT. FEE	opriate bo	OR Al	TOTAL DDIT. FEE mn 1.	